

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines

12FE4M5

NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPA-
0)

ADDRESS (number and street)

1771 N Street NW

☐ (Check if address is changed)

Washington

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address is changed)

jjaketic@nab.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)2. DATE M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 0

3. FEC IDENTIFICATION NUMBER

C C00009985

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Gordon H. SmithSignature of Treasurer Electronically Filed by Gordon H. Smith

Date

M M / D D / Y Y Y Y
0 1 / 1 4 / 2 0 1 0

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2009)

5. TYPE OF COMMITTEE (Check One)

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
CandidateCandidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a (National, State
(or subordinate) committee of the (Democratic,
Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☒ Trade Association ☐ Cooperative
- (f) ☐ ☒ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****National Association of Broadcasters**

Mailing Address

1771 N Street, NW**Washington****DC****20036**

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:



Connected Organization



Affiliated Committee



Joint Fundraising Representative



Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

Jennifer Jaketic

Mailing Address

1771 N Street, NW**Washington****DC****20036**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Director, NABPAC

Telephone number

202**429****3937****8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

of Treasurer

Gordon H. Smith

Mailing Address

1771 N Street, NW**Washington****DC****20036**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

President/CEO

Telephone number

202**429****5300**

Full Name of
Designated
Agent

Jennifer Jaketic

Mailing Address

1771 N Street, NW

Washington

DC

20036

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Director, NABPAC

Telephone number

202

429

3937

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

SunTrust

Mailing Address

1369 Connecticut Ave., NW

Washington

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Legg Mason Funds

Mailing Address

PO Box 55214

Boston

MA

02205

8504

CITY ▲

STATE ▲

ZIP CODE ▲

A. Form/Schedule : **F1A**

Transaction ID :

This is to replace FBR Funds with Legg Mason Funds, in order to reflect the business transaction between the two companies. Legg Mason took over FBR Funds. The funds that NABPAC had generated with FBR Funds were transferred to its new business owner, Legg Mason Funds. This is also to update the custodian of records and designated agent.

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

MTB Group of Funds

Mailing Address

PO Box 8477

Boston

MA

02266

8477

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

[ADDITIONAL]

Joint Fundraiser Participant

FEC ID number

C